

## Comptroller, Assistant

### WORK HISTORY FORM - 2011

**Announcement Number: 8623**  
**(Amended 05/05/2011)**

**Class Code: C0459**

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#### **INSTRUCTIONS:**

Completion of the Work History Form is part of the selection process for the Comptroller, Assistant position. Your grade will depend, in part, on the information you provide here. Your grade also will be judged, in part, by your official college transcript and any other relevant documentation which must be submitted. Civil Service reserves the right to determine the relevance of any listed experience and/or training.

This form is divided into three sections:

- I. Work experience.
- II. Post-secondary Education.
- III. Certifications.

Specific instructions for completing the sections of this form are stated at the beginning of the actual sections. You are responsible for carefully following all instructions. If for any section there are not enough blanks for you to list your experience, please attach (as necessary) additional sheets containing all information requested for that section. Be honest, specific, and complete when filling out this form. Civil Service must be able to use the information you supply on this Work History Form to determine if you meet the **minimum qualifications** as listed in the **official announcement** for this position. In filling out this Work History Form, *please use the announcement as a reference.*

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Applications will be accepted until this announcement is withdrawn.

Return your completed and signed *Work History Form* and all other documentation to Room 7W03, City Hall:

**WITHIN TWO WEEKS OF FILING YOUR APPLICATION.**

**CERTIFICATION:**

I hereby certify that this form contains no willful misrepresentation or falsification; that information given by me is true and complete to the best of my knowledge and belief. I am aware that, should investigation at any time disclose any such misrepresentation or falsification, my application may be rejected, my name may be removed from the employment list, and I may be disqualified from applying in the future for positions in the Civil Service of the City of New Orleans.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name (please print): \_\_\_\_\_

**IMPORTANT:** Check to make certain that you have completed each item fully and accurately. Your examination grade will depend upon the information you have provided.

**SECTION I. WORK EXPERIENCE - INSTRUCTIONS**

In this section you are asked to describe your work experience in areas related to the position of Comptroller, Assistant. It is to your advantage to be as thorough as possible in listing your relevant work experience.

**NOTES:**

- 1. In describing your experience, list your most recent experience first. Describe the duties performed and the approximate amount of time doing them.**
- 2. Professional experience is experience obtained after receipt of a Bachelor's Degree.**
- 3. Exempt-level (FLSA-Exempt) work is salaried.**
- 4. To be considered an employee's supervisor, you must have done all of these:**
  - a. assigned and reviewed the employee's work.**
  - b. signed payroll time cards/ time sheets or approved requests for time off.**
  - c. completed performance appraisal / service rating forms on the employee.**
- 5. If, in reviewing your form, it is found to be incomplete it may be rejected or returned to you for more information.**
- 6. Forms are provided to describe three positions on the following pages. The first two are labeled "POSITION #1" and "POSITION #2." The final form is labeled "POSITION # \_\_\_\_". If you need to describe more than three positions, copy this final form (pages 7 & 8) and complete these. Number the position described in the blank provided (when describing positions 3 or greater).**

## WORK EXPERIENCE - POSITION #1:

Describe your experience in governmental fund accounting or governmental fund auditing. Include your experience in preparing, or in auditing, governmental financial fund level and government-wide financial statements in accordance with Governmental Auditing Standards. Also, include both your experience in supervision, and your experience in the preparation of comprehensive annual financial reports for a large governmental agency.

- a. Describe briefly the area of work: \_\_\_\_\_

Job Title: \_\_\_\_\_

Organization/Department/Unit: \_\_\_\_\_

Address: \_\_\_\_\_

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- b. Dates: \_\_\_\_\_ to \_\_\_\_\_  
month/year month/year

- c. Name of Supervisor: \_\_\_\_\_ Phone number: \_\_\_\_\_  
(May we contact this person ☐ yes ☐ no)

- [illegible]

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears to be a standard notebook page or a sheet of stationery.

**WORK EXPERIENCE - POSITION #1 (Continued):**

d. Duties (continued) % of time


e. Did this position require you to supervise employees? ☐ **YES** ☐ **NO**  
 If YES, list the name and title of these employees:

Name:	Title:

f. Was this position Full-time or Part-time? ☐ **Full-time** ☐ **Part-time**  
 If part-time, please provide the approximate number of hours per week worked:

g. Was this position salaried or hourly? ☐ **Salaried** ☐ **Hourly**

## WORK EXPERIENCE - POSITION #2:

Describe your experience in governmental fund accounting or governmental fund auditing. Include your experience in preparing, or in auditing, governmental financial fund level and government-wide financial statements in accordance with Governmental Auditing Standards. Also, include both your experience in supervision, and your experience in the preparation of comprehensive annual financial reports for a large governmental agency.

- a. Describe briefly the area of work: \_\_\_\_\_

Job Title: \_\_\_\_\_

Organization/Department/Unit: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- b. Dates: \_\_\_\_\_ to \_\_\_\_\_  
month/year month/year

- c. Name of Supervisor: \_\_\_\_\_ Phone number: \_\_\_\_\_  
(May we contact this person ☐ yes ☐ no)

- [illegible]

[illegible]

**WORK EXPERIENCE - POSITION #2 (Continued):**

d. Duties (continued)	<u>% of time</u>
_____	_____
_____	_____
_____	_____
_____	_____

e. Did this position require you to supervise employees? ☐ **YES** ☐ **NO**  
 If YES, list the name and title of these employees:

Name:	Title:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

f. Was this position Full-time or Part-time? ☐ **Full-time** ☐ **Part-time**  
 If part-time, please provide the approximate number of hours per week worked:

g. Was this position salaried or hourly? ☐ **Salaried** ☐ **Hourly**

**WORK EXPERIENCE - POSITION # \_\_\_\_\_:**

Describe your experience in governmental fund accounting or governmental fund auditing. Include your experience in preparing, or in auditing, governmental financial fund level and government-wide financial statements in accordance with Governmental Auditing Standards. Also, include both your experience in supervision, and your experience in the preparation of comprehensive annual financial reports for a large governmental agency.

a. Describe briefly the area of work: \_\_\_\_\_

Job Title: \_\_\_\_\_

Organization/Department/Unit: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

b. Dates: \_\_\_\_\_ to \_\_\_\_\_  
 month/year month/year

c. Name of Supervisor: \_\_\_\_\_ Phone number: \_\_\_\_\_  
 (May we contact this person \_\_\_\_ yes \_\_\_\_ no)

d. Specific Duties (*Provide an approximate percentage of time spent doing the duties listed.*):  
% of time


**WORK EXPERIENCE - POSITION \_\_\_\_\_ (Continued):**

d. Duties (continued) % of time

_____	_____
_____	_____
_____	_____
_____	_____

e. Did this position require you to supervise employees? ☐ **YES** ☐ **NO**  
 If YES, list the name and title of these employees:

Name:	Title:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

f. Was this position Full-time or Part-time? ☐ **Full-time** ☐ **Part-time**  
 If part-time, please provide the approximate number of hours per week worked:

g. Was this position salaried or hourly? ☐ **Salaried** ☐ **Hourly**

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**\*\* If you need to describe more than three positions, copy this final form (pages 7 & 8) and complete these. Number the position described in the blank provided.**



**SECTION II. POST-SECONDARY EDUCATION**

Describe your post-secondary (college) education. In your description, list only education received from an accredited college or university (see note below). \* Original college diplomas and / or official college transcripts must be presented *within two weeks of filing an application*. The information you provide in this section will assist us in verifying that appropriate documentation has been submitted.

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1.    a) Name of the institution \_\_\_\_\_  
       b) Type of degree (BA, BS, MS, MBA, etc.) \_\_\_\_\_  
       c) Year graduated \_\_\_\_\_  
       d) Major \_\_\_\_\_  
           i) If your major was **not** Accounting, number of semester hours of Accounting: \_\_\_\_\_
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2.    a) Name of the institution \_\_\_\_\_  
       b) Type of degree (BA, BS, MS, MBA, etc.) \_\_\_\_\_  
       c) Year graduated \_\_\_\_\_  
       d) Major \_\_\_\_\_  
           i) If your major was **not** Accounting, number of semester hours of Accounting: \_\_\_\_\_
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3.    a) The name of the institution \_\_\_\_\_  
       b) Type of degree (BA, BS, MS, MBA, etc.) \_\_\_\_\_  
       c) Year graduated \_\_\_\_\_  
       d) Major \_\_\_\_\_  
           i) If your major was **not** Accounting, number of semester hours of Accounting: \_\_\_\_\_
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**\* NOTE: An accredited college or university is an institution that is accredited as a college or university by an organization that is recognized by the USDE (United States Department of Education).**

### **SECTION III. CERTIFICATIONS**

**For this section, respond to the questions below:**

1. Do you hold a Certified Public Accountant certification?

\_\_\_\_\_ **YES** \_\_\_\_\_ **NO**

2. Do you hold a Certified Internal Auditor certification?

\_\_\_\_\_ **YES** \_\_\_\_\_ **NO**

*If you answered yes to these questions, appropriate documentation must be submitted:*

**WITHIN TWO WEEKS OF FILING YOUR APPLICATION.**

*As with the Training Section, this Section of the Special Work History Form assists us in verifying that appropriate documentation has been submitted.*